## FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: Expires: April 30,2008 Estimated average burden **FORM D** hours per response.....16.00



# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix		Seriel			
D/	TE RECEIV	ED			
	[				

	in amendment and name has changed, and indicate change.) y Fund SPC: Offering of Redeemable Shares	
Filing Under (Check box(es) that apply):	Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing:	mendment	
<del></del>	A. BASIC IDENTIFICATION DATA	PROCESSED—
I. Enter the information requested about		P. MAY 0.5.2008
	mendment and name has changed, and indicate change.)	- HAI U J 2000
SSI Hedged Convertible Opportunity		THOMSON REUTERS
Address of Executive Offices c/o Dundee Leeds Management Services	(Number and Street, City, State, Zip Code) (Cayman) Ltd., 129 Front Street, Hamilton HM12, Bermuda	Telephone Number (Including Area Code) (441) 295-8017
Address of Principal Business Operations (if different from Executive Offices)  same as executive offices  Brief Description of Business	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Securities Investment		SEC Mail Processing
Type of Business Organization  corporation business trust		please specify): 2 9 2008
	or Organization: 0 2 0 8 ✓ Actual Estimion: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS		
77d(6).	ring of securities in reliance on an exemption under Regulation D	·
and Exchange Commission (SEC) on the o	later than 15 days after the first sale of securities in the offering earlier of the date it is received by the SEC at the address given by by United States registered or certified mail to that address.	a. A notice is deemed filed with the U.S. Securities selow or, if received at that address after the date on
Where To File: U.S. Securities and Excha	ange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	9549.
Copies Required: Five (5) copies of this rephotocopies of the manually signed copy	notice must be filed with the SEC, one of which must be manual or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
Information Required: A new filing must thereto, the information requested in Part C not be filed with the SEC.	contain all information requested. Amendments need only report, and any material changes from the information previously supp	ort the name of the issuer and offering, any changes lied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.		
ULOE and that have adopted this form, are to be, or have been made. If a state	Ince on the Uniform Limited Offering Exemption (ULOE) for some Issuers relying on ULOE must file a separate notice with the requires the payment of a fee as a precondition to the claim for the filed in the appropriate states in accordance with state law.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall
	ATTENTION	
Failure to tile notice in the appro appropriate federal notice will no filing of a federal notice.	opriate states will not result in a loss of the federal e ot result in a loss of an available state exemption unlo	xemption. Conversely, failure to file the ess such exemption is predictated on the

		A. BASIC IDE	ENTIFICATION DATA		
2. Enter the information re	quested for the fol	lowing:			
<ul> <li>Each promoter of the</li> </ul>	he issuer, if the iss	suer has been organized w	ithin the past five years;		
<ul> <li>Each beneficial own</li> </ul>	ner having the pow	er to vote or dispose, or dir	ect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
<ul> <li>Each executive offi</li> </ul>	icer and director o	f corporate issuers and of	corporate general and mar	naging partners of	partnership issuers; and
<ul> <li>Each general and m</li> </ul>	nanaging partner o	f partnership issuers.			•
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Buntain, Derek H.L.					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
				x 2506 GT, George To	wn, Grand Cayman KY1-1104, Cayman Islands
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Lamb, Sharon L.					
Business or Residence Addre	•	Street, City, State, Zip Co	•		
do Dundee Leeds Management Sei	rvices (Cayman) Ltd.,	2nd Floor, Waterfront Centre, 2	8 North Church Street, P.O. Bo	ox 2506 GT, George To	own, Grand Cayman KY1-1104, Cayman Island
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
	·				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		·		
ruii Name (Last name ilist, i	i marviduar)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				· · · · · · · · · · · · · · · · · · ·
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		-
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		•		
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
	(Use bla	ank sheet, or copy and use	additional copies of this	sheet, as necessary	)

-					B. IN	FORMATI	ON ABOU	t offeri	NG				
1,	Hac the	issuer cold	or does th	ne issuer in	itend to sel	L to non-24	credited is	nvestors in	this offeri	ng?		Yes	No ☑
•	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								•••••	U	Ľ		
2.											\$500,0	*00.00	
	*The C	Directors m	ay, in their	discretion	, accept le	ss than the	e minimum	investme	nt.			Yes	No
3.			permit joint									$\square$	
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, an commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a stat or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of suc a broker or dealer, you may set forth the information for that broker or dealer only.									he offering. with a state			
Ful	l Name (I	Jast name	first, if indi	vidual)					·				
Bus	siness or	Residence	Address (N	umber and	Street, Ci	ty, Statc, Z	ip Code)	<u></u>					
Nai	ne of Ass	sociated Br	oker or Dea	aler							<u></u>		
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers				<del></del>		
	(Check	"All States	" or check	indiviđual	States)	••••		•••1••••				☐ All	States
	AL	ĀK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	ĪN	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM LITE	NY	NC NC	ND WA	OH WV	OK]	OR WY	PA PR
	RI	SC	SD	TN	ΤX	UT	VT	[VA]	(WA)	(VV V)			
Ful	l Name (I	Last name	first, if indi	ividual)									•
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)	•					
Na	me of Ass	sociated Br	oker or De	aler				<u> </u>					
Sta			Listed Has										
	(Check	"All States	or check	individual	States)			***************************************			***************************************	☐ AI	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	1D
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful			first, if ind										
							<u> </u>				<u> </u>		
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Na	me of As:	sociated B	oker or De	aler									
Sta	tes in Wh	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers				<del></del>	-	
	(Check	"All State:	s" or check	individual	States)		*****		***************************************			☐ Al	l States
	ÄL	ΑK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN ·	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS OR	MO PA
	MT	NE	NV	NH	NJ	NM	NY	NC.	ND]	OH	OK	HINCH	IPAI

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s 0.00	s 0.00
	Equity	·	\$ 0.00
	· Common Preferred		φ
	<b>-</b>	c 0.00	§ 0.00
	Convertible Securities (including warrants)		s N/A
	Partnership Interests Other (Specify Redeemable Shares )		128,698,339.61
			\$ 128,698,339.61
	Total	\$	3
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount of Purchases
	Accredited Investors	<u> </u>	\$ 128,698,339.61
	Non-accredited Investors		\$_0.00
	Total (for filings under Rule 504 only)	N/A	\$_N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505	N/A	\$ N/A
	Regulation A	N/A N/A	\$ N/A
	Rule 504	<del></del>	\$ N/A
	Total	N/A	\$_N/A
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$_0.00
	Printing and Engraving Costs		\$_0.00
	Legal Fees		\$ 35,000.00
	Accounting Fees	<b>7</b>	\$ 0.00
	Engineering Fees	<b>Z</b>	\$ 0.00
	Sales Commissions (specify finders' fees separately)		\$ 0.00
	Other Expenses (identify) Misc. Operating Expenses		\$_5,000.00
	Total		\$ 40,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS							
b.	Enter the difference between the aggregate offering price given in response to Part C — Question 1						

b. Enter the difference between the aggregate offering price given in response to Part C — Question I and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

499,960,000.00

5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.

	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	\$ <u>0.00</u>	<b>☑</b> \$ 0.00
Purchase of real estate	\$ <u>0.00</u>	<b>∠</b> \$ 0.00
Purchase, rental or leasing and installation of machinery and equipment	<b>V</b> \$ 0.00	<b>☑</b> \$ 0.00
Construction or leasing of plant buildings and facilities		<b>⊘</b> \$ 0.00
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		. \$ <u>0.00</u>
Repayment of indebtedness		<b>№</b> \$ 0.00
Working capital		\$ 499,960,000.00
Other (specify):	<b>[</b> ] \$_0.00	Z \$ 0.00
	<b>\$</b> _0.00	Z \$ 0.00
Column Totals		\$ 499,960,000.00
Total Payments Listed (column totals added)		99,960,000.00

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) SSI Hedged Convertible Opportunity Fund SPC	Signature PURK N. L. Burnton 20. April. 08.
Name of Signer (Print or Type)	Title of Signer (Print or Type)
Derek H.L. Buntain	Director

ATTENTION -

		E. STATE SIGNAT	URE			
1.	Is any party described in 17 CFR 230.262 p provisions of such rule?		•		Yes	No ☑
	Sec	Appendix, Column 5, for	state response.			
2.	The undersigned issuer hereby undertakes to D (17 CFR 239.500) at such times as requir		rator of any state in w	hich this notice is f	īled a no	tice on Form
3.	The undersigned issuer hereby undertakes to issuer to offerees.	o furnish to the state admin	istrators, upon writter	n request, informa	tion furn	ished by the
4.	The undersigned issuer represents that the is limited Offering Exemption (ULOE) of the s of this exemption has the burden of establis	state in which this notice is t	iled and understands			
	uer has read this notification and knows the cont thorized person.	tents to be true and has duly o	aused this notice to be	e signed on its beha	lf by the	undersigned
Issuer (	Print or Type)	Signature	2	Date		
SSI He	dged Convertible Opportunity Fund SPC	Flerek N. J.	Buntain	20.4	Borie	1.08
Name (	Print or Type)	Title (Print or Type)			-	

Director

#### Instruction:

Derck H. L. Buntain

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or hear typed or printed signatures.

				AP	PENDIX					
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pur	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Redeemable Shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No ·	
AL		:					<del></del>		<b></b>	
AK										
AZ										
AR										
CA										
со										
СТ								<u> </u>		
DE										
DC										
FL										
GA										
НІ										
ID				_						
IL		✓	\$500,000,000.00	1	\$128,698,339.61				✓	
IN										
IA			_					ļ		
KS										
KY								ļ		
LA										
ME										
MD										
MA										
MI										
MN									-	
MS										

#### **APPENDIX** 2 4 5 1 Disqualification ' under State ULOE Type of security and aggregate (if yes, attach Intend to sell offering price explanation of Type of investor and to non-accredited waiver granted) offered in state amount purchased in State investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Redeemable Accredited Non-Accredited Yes No Investors Amount Investors State Yes No Shares Amount MO MT NE NV NH NJ NM NY NC ND ОН OK OR PΑ RI SCSD TN TX UT VT ٧A WA wv WI

				APP	ENDIX			<u></u>	. ,
l	Intendation to non-a	2 I to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Redeemable Shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									

